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| POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM | Application Number | 10/522,043-Conf. #6728 |
| | Filing Date | October 13, 2005 |
| | First Named Inventor | Xin Lu |
| | Title | Polypeptide |
| | Art Unit | 1642 |
| | Examiner Name | Sean E. Aeder |
| | Attorney Docket No. | 31265/5829 |

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 04743

OR

☐ Practitioner(s) named below:

| Name | Registration Number | Name | Registration Number |
|------|---------------------|------|---------------------|
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

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☐ Firm or Individual Name

Address

City

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Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|---|-----------|--------------|
| Signature | <i>Edward A. McDermott, Jr.</i> | Date | May 23, 2008 |
| Name | Edward A. McDermott, Jr. | Telephone | 212-450-1550 |
| Title and Company | President, Ludwig Institute for Cancer Research | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.